

MARK A. LITMAN & ASSOCIATES, P.A.
PATENT, TRADEMARK & COPYRIGHT ATTORNEYS
 York Business Center, Suite 205
 3209 West 76th Street
 Edina, MN 55435
 Telephone (952)832.9090 Facsimile (952)832.9191

RECEIVED
 CENTRAL FAX CENTER
 JUN 01 2010

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Hansen, Doris Hjorth	Examiner:	JACKSON, Brandon
Serial No.	10/536,815	Group Art Unit:	3772
Filed:	11 August 2005	Docket No.	039.002USWO
Title:	POST-OPERATIVE VEST		

You should receive 8 page(s) including this one.
 If you do not receive all pages, please call (952) 832-9090

Facsimile Center

Washington, DC 20231

TELEPHONE: (571) 272-1397

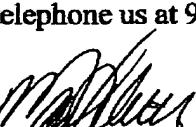
FAX NUMBER: (571) 273-8300

* Please deliver to MAIL STOP: AF

THIS LETTER AUTHORIZES THE USPTO TO DEBIT DEPOSIT ACCOUNT NUMBER 50-1391 FOR FEES ASSOCIATED WITH THIS RESPONSE, IF SUCH FEES ARE NECESSARY.

Total pages of this transmission, including this COVER SHEET: 8

If you do NOT receive all of the pages described above, please telephone us at 952.832.9090, or fax us at 952.832.9191.

By: 
 Atty: Mark A. Litman
 Reg. No. 26,390

I hereby certify that this paper is being transmitted by facsimile to the United States Patent and Trademark Office on the date shown below.


 Mark A. Litman

June 1, 2010
 Date

This transmission contains information that is confidential and/or legally privileged. It is intended for use only by the person to whom it is directed. If you have received this facsimile in error, please notify us by telephone immediately so that we can arrange for the return of the original documents to us. If you do NOT receive all of the pages, please telephone us in the U.S.A. at (952) 832.9090 or FAX us at (952)832.9191.

Doc Code: TRAN.LET

Document Description: Transmittal Letter

JUN 01 2010

PTO/SB/21 (07-09)

Approved for use through 07/31/2012. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/538,815
Filing Date	11 August 2005
First Named Inventor	Hansen, Doris Hjorth
Art Unit	3772
Examiner Name	JACKSON, Brandon
Total Number of Pages in This Submission	039.002USWO

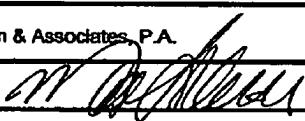
ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): -Facsimile Cover Sheet
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Part(s)/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

Remarks

***Please consider this a PETITION FOR EXTENSION OF TIME for sufficient number of months to enter these papers if an additional extension of time is deemed necessary by the Office. Authorization is hereby given to charge Deposit Account Number 50-1391 if such additional extension is necessary.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Mark A. Litman & Associates, P.A.		
Signature			
Printed name	Mark A. Litman		
Date	June 1, 2010	Reg. No.	26,390

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Mark A. Litman	Date	June 1, 2010

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.